PTO/SB/06 (07-06)

Approved for use through 1/31/2007. OMB 0651-0032

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/526,975			ling Date 25/2005	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN	
⊢	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	OR	RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	_	N/A		N/A		N/A	(+/	1	N/A	(4)	
	SEARCH FEE (37 CFR 1.16(k), (i), (		N/A		N/A		N/A		1	N/A		
	EXAMINATION FE (37 CFR 1.16(a), (p), (	EE	N/A		N/A		N/A		1	N/A		
	TAL CLAIMS CFR 1.16(i))	1	minus 20 =				x \$ =		OR	x s =		
IND	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 = *			1	x \$ =			x s =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE sheet is \$25 additi	If the specification and drawings e sheets of paper, the application si is \$250 (\$125 for small entity) for additional 50 sheets or fraction the 35 U.S.C. 41(a)(1)(G) and 37 CFF									
	MULTIPLE DEPEN	IDENT CLAIM PR	ESENT (3	7 CFR 1.16(j))		]			J			
* If t	the difference in colu	umn 1 is less than	r "0" in column 2.	-	TOTAL		J	TOTAL				
L	APPLICATION AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)							SMALL ENTITY OR			OTHER THAN SMALL ENTITY	
AMENDMENT	06/15/2010	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
Ĭ,	Total (37 CFR 1.16(i))	• 14	Minus	<del></del> 20	= 0	]	x \$ =		OR	X \$52=	0	
اظ	Independent (37 CFR 1.16(h))	• 2	Minus	3	= 0	1	x \$ =		OR	X \$220=	0	
Ĭ.	Application Size Fee (37 CFR 1.16(s))											
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
									OR	TOTAL ADD'L FEE	0	
L		(Column 1)		(Column 2)	(Column 3)							
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
ا <u>ي</u>	Total (37 CFR 1,18(i))		Minus			1	x \$ =		OR	x s =		
AMENDMENT	Independent (37 CFR 1/16(h))		Minus	***		1	x \$ =		OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))					1			1			
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
Г							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
*** If	If the entry in column 1 is less than the entry in column 2, write "or in column 3. Legal Instrument Examiner: If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "20". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If											

This collection of information is required by 37 CFR. 1.16. The information is required to obtain or retain a benefit by the public with in is to life (and by the USFTO to process) an application. Confidentiality is overwined by 80 LSC. 122 and 37 CFR. 1.14. This collection is estimated to take 12 minutes to complete, including pathering, preparing, and submitting the completed application form to the USFTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer. U.S. Patent and Trademark Office, U.S. Department of Commorce, P.O. Box 1450, Alexandris, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandris, VA 22313-1450.